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A Message from the Surgeon General

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By Vice Adm. Matthew Nathan, U.S. Navy Surgeon General, and chief, [U.S. Navy Bureau of Medicine and Surgery](#)



Shipmates and Colleagues,

The effects of possible sequestration, possibly coupled with a continuing resolution (no budget changes or new program starts from previous years), are on all our minds. I want to assure you that your senior leaders are completely engaged in looking at the dynamics and the toll on mission and people should these scenarios develop; however, we have reached a point where we must begin planning for the impact budget cuts will have on our ability to care for our Sailors, Marines and their families.

If sequestration is enacted, the impact to the Navy, Marine Corps, and Navy Medicine will be significant; Navy Medicine must and will continue to meet our operational requirements in support of the warfighter. We will continue to ensure safe, high quality patient care and mitigate as much as possible any negative impacts on access to care for our beneficiaries.

Earlier this week the Secretary of Defense informed Congress that if sequestration is enacted, DoD plans to furlough nearly 800,000 civilian employees one day each week beginning in at some point in April. In Navy Medicine over 12,000 civilian employees may be impacted by sequestration.

Our civilians are the bedrock of Navy medicine facility care. If that scenario develops we will provide specific guidance on any exemptions (though we are currently told there will be few) and how we would schedule furloughs based on local facility requirements. I recognize the significant contributions provided by our civilians and remain fully committed to supporting them and their families. The [memo from the Chief of Naval Operations](#) reinforces the importance of civilians to our Navy’s mission and provides information sites.

In addition to a possible furlough, Navy Medicine will be required to reduce spending in facilities maintenance, equipment purchases, and travel to address the cuts. Navy Medicine will not and cannot hang a “closed” sign at the front door of our facilities. We will work with our TRICARE partners where necessary to refer care as necessary, also recognizing that referring out care does not save money in the long run. We must continue to meet the needs of our patients – we will keep our emergency rooms open, continue to deliver babies, conduct necessary surgeries and procedures, and ensure access to primary care so that Sailors and Marines are ready to fight while knowing their family’s healthcare needs will be met. We will

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recognize that some elective care, and scope of care may be outsourced or deferred....always keeping patient safety foremost.

As you know, Navy Medicine is already embarked on many well thought-out changes and efforts to reduce costs and unnecessary or redundant capabilities. We recognize that sequestration and / or continuing resolution could complicate that. This is an evolving dynamic and we need to do what we do best in Navy Medicine...prepare for any contingency. We continue to pledge our support to those who seek our care as I pledge my support to you.

You are the pride of our nation and I am confident that Navy Medicine will continue to uphold the great reputation you have earned. During challenging times, it is especially important that we take care of ourselves and look out for our shipmates. You continue to make so much difference in so many lives...be it through a decade of war or to a family ill at our door. Again, the impact of sequestration and furloughs on our civilian workforce is not lost on me. As the scenarios develop rest assured that we are brokering issues candidly and emphatically. I greatly appreciate the difference you make every day. I am confident that with you at our side, we will continue to take care of those who seek our care, take care of each other, and take care of ourselves... Ship, Shipmate, Self.

Very Respectfully,
MLN

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